

NUTRIENT ANALYSIS REPORT

For compliance with General Permit for Nitrogen Discharges

Facility Name: New Haven

Month of: October-2012

Permit Number: CT0100366

Design Flow: 40,000,000

FINAL EFFLUENT

(A) Sample Date	(B) TKN mg/L	+	(C) Nitrite + Nitrate mg/L	=	(D) Total Nitrogen mg/L	x	(E) Average Daily Flow, (mgd)	x		=	(F) Total Nitrogen lbs/day
10/1/12	2.8	+	4.0	=	6.8	x	25.3	x	8.34	=	1435
10/3/12	2.0	+	3.1	=	5.1	x	29.6	x	8.34	=	1259
10/4/12	2.0	+	3.8	=	5.8	x	29.0	x	8.34	=	1403
10/7/12	1.7	+	4.6	=	6.3	x	24.7	x	8.34	=	1298
10/8/12	2.1	+	4.7	=	6.8	x	25.8	x	8.34	=	1463
10/10/12	2.1	+	4.1	=	6.2	x	30.6	x	8.34	=	1582
10/11/12	1.9	+	4.5	=	6.4	x	23.8	x	8.34	=	1270
10/14/12	1.9	+	5.1	=	7.0	x	24.3	x	8.34	=	1419
10/15/12	1.9	+	5.0	=	6.9	x	28.9	x	8.34	=	1663
10/17/12	1.7	+	4.1	=	5.8	x	24.2	x	8.34	=	1171
10/18/12	1.7	+	4.4	=	6.1	x	24.1	x	8.34	=	1226
10/21/12	2.4	+	4.0	=	6.4	x	25.6	x	8.34	=	1366
10/22/12	2.5	+	4.2	=	6.7	x	26.8	x	8.34	=	1498
10/24/12	2.2	+	3.3	=	5.5	x	27.5	x	8.34	=	1261
10/25/12	2.4	+	3.8	=	6.2	x	24.8	x	8.34	=	1282
10/28/12	2.5	+	3.4	=	5.9	x	25.4	x	8.34	=	1250
10/29/12	5.1	+	2.6	=	7.7	x	38.7	x	8.34	=	2485
10/31/12	4.0	+	2.5	=	6.5	x	26.6	x	8.34	=	1442
Total Pounds										=	25773
(G) Average Pounds										=	1432

Date of Last Calibration of Flow Meter: 06/20/2012

Note:

(A) Sample Date: Date of Sampling ended

(B) TKN (mg/L): A single number because TKN is the sum of ammonia and organic nitrogen

(C) Nitrite + Nitrate: A single number

(D) Total Nitrogen (mg/L): TKN + (nitrite + nitrate) = Total Nitrogen, rounded to 0.1 mg/L

(E) Average Daily Flow (mgd): Day of sampling: Rounded to 0.1 mgd if design flow is 1.0 mgd or more.

Round to nearest 0.01 mgd if design flow is less than 1.0 mgd.

(F) Total Pounds: Sum of all monitoring days

(G) Average Pounds: Total pounds/ Number of days; rounded to nearest whole number. Must also be reported in DMR.

STATEMENT OF ACKNOWLEDGEMENT

I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that, based on reasonable investigation, including my inquiry of those individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief.

Authorized Official: _____

Title: Project Manager

Date: 11/9/2012